

U.S. Department of Homeland Security  
500 12th Street, SW  
Washington, D.C. 20536



## U.S. Immigration and Customs Enforcement

DATE: August 7<sup>th</sup>, 2017

TO: SDDO (b)(6),(b)(7)(C)  
Detention Compliance Coordinator  
Boston Field Office

FROM: (b)(6),(b)(7)(C)  
Facility Compliance Coordinator  
Cumberland County Jail (IGSA)

SUBJECT: Operational Review Self-Assessment (ORSA) 2017 Summary Letter

(b)(6),(b)(7)(C) designated Facility Compliance Coordinator, performed the 2017 Operational Review Self-Assessment for compliance with the ICE National Detention Standards (NDS) of the Cumberland County Jail Facility in Portland, ME State during the period of July 17<sup>th</sup>, 2017 – August 7<sup>th</sup>, 2017. This is an IGSA facility.

The annual inspection was performed under the guidance of the Boston Field Office Detention Compliance Coordinator (DCC), SDDO (b)(6),(b)(7)(C)

### Type of Review

This review is a scheduled ORSA inspection, which is performed to determine overall compliance with the ICE NDS for Under 72 hour facilities or eligible Over 72 hour facilities.

### Review Summary

The Cumberland County Jail Facility is currently accredited by:

- X   The American Correctional Association (ACA) – (01/23/2017)
- X   The National Commission on Correctional Health Care (NCCHC) – (04/14/2017)
- N/A   The Joint Commission (TJC)

### Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the annual ORSA Inspection:

<u>2017 ORSA Inspection</u>	
Meets Standards/Acceptable	38
Does Not Meet Standards/Deficient	0
Not Applicable	2

### DCC Issues and Concerns

There were no substantive issues or concerns during this inspection.

### Significant Observations

There were no significant observations noted during this inspection.

### Recommended Rating and Justification

The Detention Compliance Coordinator recommends that the facility receive a rating of "Meets Standards/Acceptable".

The facility complies with the ICE National Detention Standards (NDS). There were 0 standards found Does Not Meet/Deficient and 2 standards were listed as Not Applicable (N/A). All remaining 38 standards were found to be in compliance.

### FCC Assurance Statement

The findings of compliance and noncompliance are accurately and completely documented on the G-324B/O Inspection Form, 324 SIS and are supported by documentation retained in the inspection file. An out brief was conducted at the facility and in addition to the ORSA Inspection Team; the following staff were present: None.

This ORSA has been (b)(6),(b)(7)(C) red with by the Facility Compliance Coordinator.	
Reviewer Name (Printed)	*Reviewed Date: 08-07-2017
Reviewer Title (Printed): (b)(6),(b)(7)(C)	
Reviewer Signature (for printed form submission):	

This ORSA has been reviewed and concurred with by the Field Office Director or designee (ERO field office official equivalent to an AFOD or above).	
Reviewer Name (Printed): (b)(6),(b)(7)(C)	*Reviewed Date: 08-07-2019
Reviewer Title (Printed): (a) AFOD	
Reviewer Signature (for printed form submission):	
This ORSA has been reviewed by the Assistant Director of Custody Management or designee.	
Reviewer Name (Printed):	*Reviewed Date:
Reviewer Title (Printed):	
Reviewer Signature (for printed form submission):	

**A. Type of Facility Reviewed**

- ☐ ICE Service Processing Center  
☐ ICE Contract Detention Facility  
☐ ICE Intergovernmental Service Agreement

**B. Current Inspection**

Type of Inspection  
☒ Field Office ☐ HQ Inspection  
Date[s] of Facility Review  
August 4<sup>th</sup> 2017

**C. Previous/Most Recent Facility Review**

Date[s] of Last Facility Review  
August 31<sup>st</sup> 2016  
Previous Rating  
☐ Superior ☒ Good ☐ Acceptable ☐ Deficient ☐ At-Risk

**D. Name and Location of Facility**

Name  
Cumberland County Jail  
Address (Street and Name)  
50 County Way  
City, State and Zip Code  
Portland Maine 04102  
County  
Cumberland County  
(b)(6),(b)(7)(C) of Chief Executive Officer (Warden/OIC/Supt.)  
Jail Administrator  
Telephone # (Include Area Code)  
(207) 774 (b)(6),(b)(7)(C)  
Field Office / Sub-Office (List Office with oversight responsibilities)  
Boston, MA/Portland, ME  
Distance from Field Office  
2 hours 20 minutes

**E. ICE Information**

(b)(6),(b)(7)(C) e. Title and Duty Station  
5200 POM  
Name of Team Member / Title / Duty Location  
Name of Team Member / Title / Duty Location  
Name of Team Member / Title / Duty Location  
Name of Team Member / Title / Duty Location

**F. CDF/IGSA Information Only**

Contract Number  
36-99-0088  
Date of Contract or IGSA  
10-01-96  
Basic Rates per Man-Day  
(b)(7)(E)  
Other Charges: (If None, Indicate N/A)  
N/A

Estimated Man-days Per Year:

**G. Accreditation Certificates**

List all State or National Accreditation[s] received:  
ACA, NCCCHC  
☐ Check box if facility has no accreditation[s]

**H. Problems / Complaints (Copies must be attached)**

The Facility is under Court Order or Class Action Finding  
☐ Court Order ☐ Class Action Order  
The Facility has Significant Litigation Pending  
☐ Major Litigation ☐ Life/Safety Issues  
☒ Check if None.

**I. Facility History**

Date Built  
1994  
Date Last Remodeled or Upgraded  
N/A  
Date New Construction / Bed space Added  
N/A  
Future Construction Planned  
☐ Yes ☒ No Date:  
Current Bed space  
584  
Future Bed space (# New Beds only)  
Number: N/A Date: N/A

**J. Total Facility Population**

Total Facility Intake for previous 12 months  
7,594  
Total ICE Man-days for Previous 12 months  
651

**K. Classification Level (ICE SPCs and CDFs Only)**

	L-1	L-2	L-3
Adult Male	N/A	N/A	N/A
Adult Female	N/A	N/A	N/A

**L. Facility Capacity**

	Rated	Operational	Emergency
Adult Male	484	366	508
Adult Female	86	73	86

☐ Facility holds Juveniles Offenders 16 and older as Adults

**M. Average Daily Population**

	ICE	USMS	Other
Adult Male	3	61	256
Adult Female	1	11	33

**N. Facility Staffing Level**

Security:  
(b)(7)(E)  
Support:

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### Significant Incident Summary Worksheet

For Nakamoto to complete its review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE' detainees at your facility.

<i>Incidents</i>	<i>Description</i>	<i>Jul – Sept.</i>	<i>Oct – Dec.</i>	<i>Jan. – March</i>	<i>April – June</i>
Assault: Offenders on Offenders <sup>1</sup>	Types (Sexual <sup>2</sup> , Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	0	0	1	0
	Without Weapon	14	13	16	14
Assault: Detainee on Staff	Physical	Physical	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	0	3	4	1
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		0	0	2	4
Disturbances <sup>4</sup>		0	0	0	0
Number of Times Chemical Agents Used		4	2	4	4
Number of Times Special Reaction Team Deployed/Used		0	0	1	1
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	2V	3V	9V	8V
	Type (C=Chair, B=Bed, BB=Board, O=Other)	C	C	C	C
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	77	55	63	45
	# Resolved in favor of Offender/Detainee	10	5	10	5
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	1A	other
	Number	0	0	0	1
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	28	56	43	31
	# Psychiatric Cases referred for Outside Care	0	1	0	0

<sup>1</sup> Any attempted physical contact or physical contact that involves two or more offenders

<sup>2</sup> Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

<sup>3</sup> Routine transportation of detainees/offenders is not considered "forced"

<sup>4</sup> Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

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Form G-324 SIS ORSA (Rev. 5/8/12)



National Commission on Correctional Health Care

*Certificate of Accreditation*

Cumberland County Jail  
Portland, Maine

The above named institution has been accredited by the National Commission on Correctional Health Care upon a review of its records and facilities to have met all the requirements of accreditation.

Approved:

*James H. ...*

James H. ...

*...*

...



*The American Correctional Association  
and the  
Commission on Accreditation for Corrections  
announces*

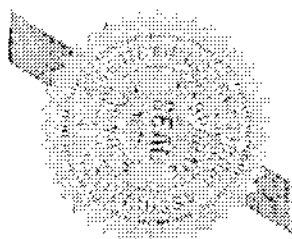
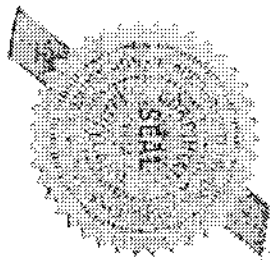
# ACCREDITATION

*to  
Cumberland County Sheriff's Office  
Cumberland County Jail  
Cumberland, Maine*

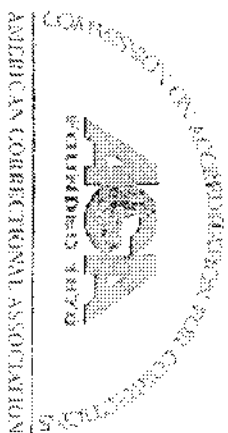
*2017 - 2020*

*in recognition of the attainment of excellence in the operation of  
an Adult Detention Facility*

*presented this 23rd day of January 2017*



*Mark G. Gandy*  
ACA EXECUTIVE DIRECTOR



*John H. Gandy*  
COMMISSIONER  
DEPARTMENT OF CORRECTIONS  
MAINE

**Conditions of Confinement Worksheet**  
**Operational Review Self-Assessment (ORSA)**  
**Over 72-Hour IGSA Facilities**  
**Average Daily Population of Less Than Ten Detainees**

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<b>Facility Name</b>	Cumberland County Jail
<b>Address (Street and Name)</b>	50 County Way
<b>City, State and Zip Code</b>	Portland Maine 04102
<b>County</b>	Cumberland County
<b>Name and title of Chief Executive Officer (Warden/OIC/Superintendent)</b>	(b)(6),(b)(7)(C), Jail Administrator
<b>Name and title of Facility Reviewer</b>	George Panenka, Accreditation Manager
<b>Date[s] of Facility Review</b>	August 2017
<b>Signature of Facility Reviewer</b>	(b)(6),(b)(7)(C)
<b>Field Office/Name of Field Office Director</b>	
<b>Name and Title of Field Officer Reviewer</b>	

<b><i>Date of Field Office Review</i></b>
<b><i>Signature of Field Office Reviewer</i></b>
<b><i>Is a Corrective Action Plan Required?</i></b> <input type="checkbox"/> YES <input type="checkbox"/> NO

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For each standard rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. Each facility should examine the entire worksheet to identify areas of improvement including those standards where an overall finding of acceptable was achieved.



# **Section I**

## *Detainee Services Standards*

ACCESS TO LEGAL MATERIALS				
<b>Policy:</b> Facilities holding ICE detainees shall permit detainees access to a law library, and provide legal materials, facilities, equipment and document copying privileges, and the opportunity to prepare legal documents.				
Components	Y	N	N/A	Remarks
The law library contains all materials listed in the "Access to Legal Materials" standard, Attachment A. The listing of materials is posted in the law library.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses Casemaker Legal to provide Attachment A materials. Therefore there is no requirement to post listing of material.
The law library is adequately equipped with typewriter, computers or both and has sufficient supplies for daily use by the detainees.	X	<input type="checkbox"/>	<input type="checkbox"/>	
In addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are offered a minimum 5 hours per week in the law library. <u>Detainees are not required to forego recreation time in lieu of library usage.</u> Detainees facing a court deadline are given priority use of the law library.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility allows detainees an opportunity to use the law library twice a week or upon request.
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

**Remarks:** (Record significant facts, observations, alternate source used for verification, etc.)

(b)(6),(b)(7)(C)

\_\_\_\_\_  
 Signature Date

## ADMISSION AND RELEASE

**Policy:** All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.

Components	Y	N	N/A	Remarks
<p>In processing includes an orientation of the facility. The orientation includes:</p> <ul style="list-style-type: none"> <li>Unacceptable activities and behavior, and corresponding sanctions;</li> <li>How to contact ICE;</li> <li>The availability of pro bono legal services</li> <li>How to pursue pro bono legal services. Schedule of programs.</li> <li>Services and daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library</li> <li>Sick-call procedures, etc., and the detainee handbook.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>The section of the component that requires the following topics to be included in the detainee orientation is specific to SPCs or CDFs: Unacceptable activities and behavior and corresponding sanctions; how to contact ICE; the availability of pro bono legal services, and how to pursue such services; schedule of programs. Services, daily activities, including visitation, telephone usage, religious programs, count procedures, access to and use of the law library and the general library; and sick call procedures. Detainees arriving at this facility are shown an orientation video and given a facility handbook. The orientation includes all topics identified in this component.</p>
Medical screenings are performed by medical staff or persons who have received specialized training for the purpose of conducting an initial health screening.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical screenings are performed by 24-hour medical staff.
The "Contraband" standard governs all personal property searches. IGSA/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy D-220, Search Procedures, explains personal property searches. Intake staff prepares and inventory of detainee property and provides a copy to the detainee.
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	X	<input type="checkbox"/>	<input type="checkbox"/>	

## ADMISSION AND RELEASE

**Policy:** All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.

Components	Y	N	N/A	Remarks
The facility classification system includes: <ul style="list-style-type: none"> <li>Classifying detainees upon arrival;</li> <li>Separating from the general population those individuals who cannot be classified upon arrival; and</li> <li>The first-line supervisor or designated classification specialist reviewing every classification decision.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility Administrative Support Captain reviews classification decisions.
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

Inspector's Signature / Date

7/17/12

### CLASSIFICATION SYSTEM

**Policy:** All facilities will develop and implement a system according to which ICE detainees are classified. The classification system will ensure that each detainee is placed in the appropriate category, physically separated from detainees in other categories

Components	Y	N	N/A	Remarks
The facility has a system for classifying detainees. In CDFs and IGSA's, an Objective Classification System or similar is used.	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy D-100, Inmate Classification, outlines the classification systems.
Housing assignments are based on classification-level.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	X	<input type="checkbox"/>	<input type="checkbox"/>	

☒ **Acceptable**
         
 ☐ **Deficient**
         
 ☐ **At-Risk**
         
 ☐ **Repeat Finding**

**Remarks:** (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

7/17/17  
Date

### CORRESPONDENCE AND OTHER MAIL

**Policy:** All facilities will ensure that detainees send and receive correspondence in a timely manner, subject to limitations required for the safety, security, and orderly operation of the facility. Other mail will be permitted, subject to the same limitations. Each facility will widely distribute its guidelines concerning correspondence and other mail.

Components	Y	N	N/A	Remarks
The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	X	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring correspondence rules to be posted in the housing unit or common area is specific to SPCs and CDFs. Rules for correspondence and other mail are addressed in the facility handbook which is available to detainees upon admission to their housing unit via the Pod Kiosk.
Staff maintains a written record of every item removed from detainee mail.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Every indigent detainee has the opportunity to mail, at government expense: Reasonable correspondence about a legal matter: Three one ounce letters per week; Packages deemed necessary by ICE.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	X	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Re (b)(6),(b)(7)(C) (significant facts, observations, other sources used, etc.)

Auditor's Signature / Date



### DETAINEE HANDBOOK

**Policy:** Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

Components	Y	N	N/A	Remarks
The detainee handbook is written in English and translated into Spanish or into the next most-prevalent Language(s).	X	<input type="checkbox"/>	<input type="checkbox"/>	
The detainee handbook states in clear language basic detainee responsibilities.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The handbook describes the detainee disciplinary policy and procedures: Including: <ul style="list-style-type: none"> <li>Prohibited acts and severity scale sanctions.</li> <li>Time limits in the Disciplinary Process.</li> <li>Summary of Disciplinary Process.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Three levels of offenses and corresponding sanctions are identified to include minor, major A and major B levels. Each delineates time limits for sanctions and includes a description of the disciplinary process, the "filing of charges" and Disciplinary Board Hearings.
The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> <li>Informal (if used) and formal grievance procedures;</li> <li>The appeals process;</li> <li>In CDE facilities: procedures for filing an appeal of a grievance with ICE.</li> <li>Staff/detainee availability to help during the grievance process.</li> <li>Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>How to file a complaint about officer misconduct with the Department of Homeland Security.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Informal resolution to grievances is identified. An appeal process is described. Availability of staff or detainee assistance is identified. A statement prohibiting retaliation is included in the grievance section. Forms are maintained in each housing unit specifically for ICE detainees to communicate with ICE staff. Forms are collected daily and all ICE request forms are forwarded to the ICE agent's mailbox in the administrative area.
The detainee handbook describes the medical sick call procedures for general population and segregation.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The handbook specifies the rights and responsibilities of all detainees.	X	<input type="checkbox"/>	<input type="checkbox"/>	

☒ **Acceptable**
         
 ☐ **Deficient**
         
 ☐ **At-Risk**
         
 ☐ **Repeat Finding**

Remarks: (b)(6), (b)(7)(C) [Redacted] facts, observations, other sources used, etc.)

Auditor's Signature / Date

## FOOD SERVICE

**Policy:** Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
The food service program is under the direct supervision of a <u>professionally trained</u> and certified service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.	X	<input type="checkbox"/>	<input type="checkbox"/>	The Food Service Administrator (FSA) was trained in the U.S. Navy which he served for 22 years. The training was ongoing during that period. The Food Service Manager has been working in food service for 47 years.
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	X	<input type="checkbox"/>	<input type="checkbox"/>	A review of the menu indicates all meals served include a hot entrée. Meals are served at 7:00 AM, 11:00 AM and 5:00 PM.
Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device.	X	<input type="checkbox"/>	<input type="checkbox"/>	The knife cabinet is secured in the locked office of the FSA. The cabinet is a metal box with a Plexiglas door which locks with a hasp and keyed padlock. Knives and other utensils are shadow boarded. Only the FSA and Cook II's have keys to the cabinet.
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervise detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	X	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring staff to monitor the condition of knives and dining utensils is specific to SPCs and CDFs. Knives taken from the knife cabinet are cable tethered to workstations. Staff inspects and monitors the condition of knives and utensils daily.
The food service program addresses medical diets.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The food service staff instructs detainee volunteers on: <ul style="list-style-type: none"> <li>a. Personal cleanliness and hygiene.</li> <li>b. Sanitary techniques for preparing, storing, and serving food, and</li> <li>c. The sanitary operation, care, and maintenance of equipment.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Initial training is conducted for kitchen detainee workers and addresses the bulleted items identified.
Standard operating procedures include weekly inspections of all food service areas, as well as dining and food preparation areas and equipment.	X	<input type="checkbox"/>	<input type="checkbox"/>	Daily inspections are conducted by the FSA or cook II's.
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	X	<input type="checkbox"/>	<input type="checkbox"/>	
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	X	<input type="checkbox"/>	<input type="checkbox"/>	The last nutritional analysis was conducted by a registered dietician on August, 2016.

# FOOD SERVICE

**Policy:** Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
<p>The Cook Foreman has the authority to change menu items if necessary.</p> <ul style="list-style-type: none"> <li>If yes, documenting each substitution, along with its justification</li> <li>With copy to FSA</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Standard requires "Cook Supervisor or equivalent" as having this authority. The Cook IIs are authorized to make changes to the menu, documenting the substitution for the FSA.
<p>A common-fare menu available to detainees whose dietary requirements cannot be met on the main.</p> <ul style="list-style-type: none"> <li>Changes to the planned common-fare menu can be made at the facility level.</li> <li>Hot entrees are offered three times a week.</li> <li>The common-fare menus satisfy nutritional recommended daily allowances (RDAs).</li> <li>Staff routinely provides hot water for instant beverages and foods.</li> <li>Common-fare meals are served with: <ul style="list-style-type: none"> <li>Disposable plates and utensils.</li> <li>Reusable plates and utensils.</li> </ul> </li> <li>Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Changes to the common-fare may be made routinely dependent upon dietary or security requirements. Hot entrée are offered daily. The FSA and medical staff are consulted to provide a common-fare menu to satisfy Recommended Daily Allowances. Hot water is available in housing units. Common-fare meals delivered to the Health Care Unit are served in Styrofoam containers while meals sent into housing units are served in thermal trays. Meals are served with disposable utensils. Separate cutting boards and tools are used to prepare common-fare meals. Kosher meals are ordered from an outside vendor when necessary.
<p>The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year.</p> <ul style="list-style-type: none"> <li>Muslims fasting during Ramadan receive their meals after sundown.</li> <li>Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for-Passover meals as those who do participate.</li> <li>Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Meals served during Ramadan comply with fasting schedules. Kosher meals are ordered from an outside vendor if necessary. Fish is offered as an option for detainees observing Ash Wednesday and Lent.
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served.	X	<input type="checkbox"/>	<input type="checkbox"/>	
All meals provided in nutritionally adequate portions.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Everyone working in the food service department complies with food safety and sanitation requirements.	X	<input type="checkbox"/>	<input type="checkbox"/>	

## FOOD SERVICE

**Policy:** Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • who conducts the inspections?	X	<input type="checkbox"/>	<input type="checkbox"/>	Daily inspections are conducted by the FSA or Cook IIs.
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.	X	<input type="checkbox"/>	<input type="checkbox"/>	Breakfast, lunch and dinner temperatures are observed and entered in the daily log for pre-wash, wash and rinse cycles.
Staff documents the results of every refrigerator/ freezer temperature check.	X	<input type="checkbox"/>	<input type="checkbox"/>	Morning and afternoon refrigerator and freezer temperatures are observed and recorded.
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	X	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable
 ☐ Deficient
 ☐ At-Risk
 ☐ Repeat Finding

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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Date

*7/12/17*

### FUNDS AND PERSONAL PROPERTY

**Policy:** All facilities will implement procedures to control and safeguard detainees' personal property. Procedures will provide for the secure storage of funds, valuables, baggage and other personal property; the documentation and receipting of surrendered property; and the initial and regularly scheduled inventorying of all funds, valuables, and other property.

☐ **Standard NA: (IGSA ONLY) Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.**

Components	Y	N	N/A	Remarks
Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are accessible to designated supervisor(s) only	X	<input type="checkbox"/>	<input type="checkbox"/>	Property is maintained in nylon clothes bags in a secured property room (b)(7)(E) is assigned to the property room and maintains the only key which is turned over to his replacement on his days off.
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSA's and CDFs, using a personal property inventory form that meets the ICE standard?	X	<input type="checkbox"/>	<input type="checkbox"/>	An inventory sheet meeting ICE requirements is filed in a plastic pocket on the front of the clothes bag.
Staff forwards an arriving detainee's medication to the medical staff.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medication confiscated during admission are secured in a locked file cabinet for medical staff to retrieve on a daily basis.
Staff follows written procedures when returning property to detainees.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility disposes of abandoned property in accordance with written procedures. If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility has revised policy C-135 Inmate Property, to reflect that "Any abandoned or forgotten property belonging to ICE detainees will be forwarded to the local ICE authorities".

☒ **Acceptable**

☐ **Deficient**

☐ **At-Risk**

☐ **Repeat Finding**

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significant facts, observations, other sources used, etc.)

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### GROUP LEGAL RIGHTS PRESENTATIONS

**Policy:** Facilities housing ICE detainees shall permit authorized persons to make presentations to groups of detainees for the purpose of informing them of U.S. immigration law and procedures, consistent with the security and orderly operation of each facility. ICE encourages such presentations, which instruct detainees about the immigration system and their rights and options within it.

☐ Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.

Components	Y	N	N/A	Remarks
Staff permits presenters to distribute ICE-approved materials.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Interpreters are admitted when necessary to assist attorneys and other legal representatives.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.	X	<input type="checkbox"/>	<input type="checkbox"/>	
A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request.	X	<input type="checkbox"/>	<input type="checkbox"/>	

☒ **Acceptable**
         
 ☐ **Deficient**
         
 ☐ **At-Risk**
         
 ☐ **Repeat Finding**

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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 Auditor's Signature / Date

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### DETAINEE GRIEVANCE PROCEDURES

**Policy:** Every facility will develop and implement standard operating procedures (SOPs) for addressing detainee grievances in timely fashion. Each step in the process will occur within the prescribed time frame. Among other things, a grievance will be processed, investigated, and decided (subject to appeal) in accordance with the SOPs; a grievance committee will convene as provided in the SOPs. Standard procedure will include providing the detainee with a written response to any formal grievance, which will include the basis for the decision. The facility will also establish standard procedures for handling emergency grievances. All grievances will receive supervisory review. Reprisal against the filer of a grievance will not be tolerated.

Components	Y	N	N/A	Remarks
Written procedures provide for the informal resolution of oral grievances (Not mandatory). <ul style="list-style-type: none"> <li>If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The detainee handbook states a verbal attempt should be made to resolve the complaint with the parties involved.
Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> <li>Detainees may seek help from other detainees or facility staff when preparing a grievance.</li> <li>Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may seek assistance from other detainees or staff in preparing a grievance. Staff is available to assist detainees in preparing grievances.
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	X	<input type="checkbox"/>	<input type="checkbox"/>	
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodges a complaint. If yes, explain.	<input type="checkbox"/>	X	<input type="checkbox"/>	There were no documented cases of staff harassing, disciplining, penalizing or otherwise retaliating against a detainee.
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	X	<input type="checkbox"/>	<input type="checkbox"/>	

☒ **Acceptable**
         
 ☐ **Deficient**
         
 ☐ **At-Risk**
         
 ☐ **Repeat Finding**

**Remarks:** (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

  
 Auditor's Signature / Date

## ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

**Policy:** ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention.

Components	Y	N	N/A	Remarks
<p>The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens and towels.</p> <ul style="list-style-type: none"> <li>The supply of these items exceeds the minimum required for the number of detainees</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Storage of clothing, bedding, towels and linens were observed in the property room and exceeded minimum quantities.
<p>All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:</p> <ul style="list-style-type: none"> <li>One uniform shirt and one pair of uniform pants, or one jumpsuit;</li> <li>One pair of socks;</li> <li>One pair of underwear (Daily change); and</li> </ul> <p>One pair of facility-issued footwear.</p>	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>The bulleted items in this component are specific to DPCs and CDFs. When touring the jail, detainees were wearing clean temperature appropriate clothing. During admission each detainee receives:</p> <ul style="list-style-type: none"> <li>- two pair of shirts and pants</li> <li>-Three pairs of socks</li> <li>-Three pairs of underwear</li> <li>-one pair of footwear</li> </ul>
<p>Additional clothing is available for changing weather conditions, or as seasonally appropriate.</p>	X	<input type="checkbox"/>	<input type="checkbox"/>	
<p>New detainees are issued clean bedding, linens, and towels. They receive at a minimum:</p> <ul style="list-style-type: none"> <li>One mattress;</li> <li>One blanket;</li> <li>Two sheets;</li> <li>One pillowcase;</li> <li>One towel; and</li> <li>Additional blankets are issued based on local weather conditions.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>The bulleted items in this component are specific to DPCs and CDFs. Detainees are issued the following:</p> <ul style="list-style-type: none"> <li>-one uni-mattress (with attached pillow)</li> <li>-two sheets</li> <li>-two blankets</li> <li>-two towels</li> </ul> <p>Additional blankets are issued based upon weather conditions.</p>
<p>Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> <li>Socks and undergarments - exchanged daily.</li> <li>Outer garments - twice weekly.</li> <li>Sheets - weekly.</li> <li>Towels - weekly.</li> <li>Pillowcases - weekly.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Housing units maintain a laundry operation and detainees are allowed to have clothing and linens cleaned on a daily basis.

☒ **Acceptable**
         
 ☐ **Deficient**
         
 ☐ **At-Risk**
         
 ☐ **Repeat Finding**

(b)(6), (b)(7)(C) Significant facts, observations, other sources used, etc.)



Date

MARRIAGE REQUESTS				
<b>Policy:</b> All detainee marriage requests will receive case-by-case consideration from ICE management.				
Components	Y	N	N/A	Remarks
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

**Note:** Any and all marriage requests are forwarded to the local ICE office.

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Auditor's Signature / Date

NON-MEDICAL EMERGENCY ESCORTED TRIPS				
<b>Policy:</b> The Immigration and Customs Enforcement (ICE) may provide detainees with staff-escorted trips into the community for the purpose of visiting critically ill members of the detainee's immediate family, or for attending funerals.				
<b>X Standard NA:</b> Check this box if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.				
Components	Y	N	N/A	Remarks
Each escort detail includes at least two officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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RECREATION				
<b>Policy:</b> It is ICE policy to provide access to recreational programs and activities to all ICE detainees, to the extent possible, under conditions of security and supervision that protect their safety and welfare.				
Components	Y	N	N/A	Remarks
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.	X	<input type="checkbox"/>	<input type="checkbox"/>	Weather permitting, detainees in segregation are allowed outdoor recreation one hour each day, seven days a week.
Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	X	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed one hour of recreation in the large indoor gym five days a week.
<b>X If outdoor recreation is offered check this box. No further information is required when outdoor recreation is offered.</b>				
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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### RELIGIOUS PRACTICES

**Policy:** Facilities will provide ICE detainees of all faiths with reasonable and equitable opportunities to participate in the practices of their faith, limited only by the constraints of safety, security, the orderly operations of the facility and budgetary considerations.

Components	Y	N	N/A	Remarks
Detainees are allowed to engage in religious services.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Each detainee is allowed religious items in his/her immediate possession.	X	<input type="checkbox"/>	<input type="checkbox"/>	Religious medallions and if requested, rosaries are provided by the chaplain upon request.
The facility allows detainees to observe the major "holy days" of their religious faith. List any exceptions.	X	<input type="checkbox"/>	<input type="checkbox"/>	Christian, Jewish and Muslim holidays are routinely observed and corresponding activities are conducted.

☒ **Acceptable**

☐ **Deficient**

☐ **At-Risk**

☐ **Repeat Finding**

**Remarks:** (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)(C)

Date



### DETAINEE TELEPHONE ACCESS

**Policy:** All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.

Components	Y	N	N/A	Remarks
Detainees are allowed access to telephones during established facility waking hours.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility main housing units have six phones for 86 detainees. The smaller units have two phones for 48 detainees.
Access rules are posted in housing units.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Telephones are inspected regularly by facility staff to ensure that they are in good working order.	X	<input type="checkbox"/>	<input type="checkbox"/>	IEA Jail Liaisons check telephones regularly to see if they are in good working order.
The facility provides the detainees with the ability to make non-collect (special access) calls.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.	X	<input type="checkbox"/>	<input type="checkbox"/>	An ICE detainee was asked if the OIG number is programmed and working, the detainee answered in the affirmative to both. The detainee's name was (b)(6),(b)(7)(C) pod (b)(6),(b)(7)(C).
Special Access calls are at no charge to the detainees.	X	<input type="checkbox"/>	<input type="checkbox"/>	
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	X	<input type="checkbox"/>	<input type="checkbox"/>	The telephones in the housing units have a placard on the telephones that states that calls may be monitored.
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are allowed to return emergency phone calls as soon as possible.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	X	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in administrative segregation are not afforded the same access as detainees in general population. However they can request and be granted extra time as needed.
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	X	<input type="checkbox"/>	<input type="checkbox"/>	



DETAINEE TELEPHONE ACCESS				
<b>Policy:</b> All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.				
Components	Y	N	N/A	Remarks
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	X	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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 Date 7/17/17

VISITATION				
<b>Policy:</b> ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.				
Components	Y	N	N/A	Remarks
There is a written visitation schedule and hours for general visitation.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility allows visitation twice a week for each housing unit. The schedule includes visits during the morning and evening hours.
The visitation schedule and rules are available to the public.	X	<input type="checkbox"/>	<input type="checkbox"/>	The visitation schedule is posted in the main lobby and is available in hard copy for visitors.
The hours for all categories of visitation are posted in the visitation waiting area.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Legal visitation is available seven (7) days a week, including holidays.	X	<input type="checkbox"/>	<input type="checkbox"/>	
On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility allows two hour legal visits on the weekends and holidays. Additional hours available upon request and approved on a case by case basis.
A general visitation log is maintained.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains an electronic visitation log at the entrance of the control area.
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Provisions for NGO visitation as stated in the Detention Standards are complied with.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	X	<input type="checkbox"/>	<input type="checkbox"/>	
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in special housing afforded visitation.	X	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

*Summary (Summarize significant facts, observations, other sources used, etc.)*

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### VOLUNTARY WORK PROGRAM

**Policy:** In every facility offering a voluntary work program, ICE detainees will have the opportunity to work and earn money by participating. While not legally required, ICE affords detainee workers basic Occupational Safety and Health Administration (OSHA) protections.

☐ Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

Components	Y	N	N/A	Remarks
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	X	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainee special detainee assignments are restricted to housing units in which they live.
Medical staff screen and formally certifies detainee food service volunteers: <ul style="list-style-type: none"> <li>• Before the assignment begins</li> <li>• As a matter of written procedure</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees are not authorized to work in food services; however, non ICE detainees are medically screened prior to working in food service.
Written procedures govern selection of detainees for the Voluntary Work Program.	X	<input type="checkbox"/>	<input type="checkbox"/>	The detainee handbook explains the volunteer work program and is also defined in facility policy, Detainee Worker Selection
The facility complies with work-hour requirements for detainees, not exceeding: <ul style="list-style-type: none"> <li>• Eight hours a day.</li> <li>• Forty hours a week.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees receive safety equipment/ training sufficient for the assignment	X	<input type="checkbox"/>	<input type="checkbox"/>	
Proper procedure is followed when an ICE detainee is injured on the job.	X	<input type="checkbox"/>	<input type="checkbox"/>	Detainee(s) injured while working are taken to the health care unit.

☒ **Acceptable**
☐ **Deficient**
☐ **At-Risk**
☐ **Repeat Finding**

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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 Date / Date

# **Section II**

## *Health Services Standards*

## HUNGER STRIKES

**Policy:** All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.

Components	Y	N	N/A	Remarks
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	X	<input type="checkbox"/>	<input type="checkbox"/>	
CDFs and IGSAAs immediately report a hunger strike to the ICE.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility reports a hunger-striking detainee to the area ICE office.
The facility has established procedures to ensure staff respond immediately to a hunger strike.	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy B-221, Hunger Strikes, describes procedures to ensure staff responds immediately to a hunger strike.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. If yes, in an observation room?	X	<input type="checkbox"/>	<input type="checkbox"/>	
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff records the weight, vital signs, and urine ketones of a hunger striker on a daily basis (24hrs.) Corizon policy JI-05-02
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical policy J-I-05.01, Right to Refuse Treatment, addresses this component. A signed refusal of treatment form is required.
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	X	<input type="checkbox"/>	<input type="checkbox"/>	Three meals per day are provided to the hunger striker per policy B-221 Hunger Strikes.
Staff maintains the hunger striker's supply of drinking water/other beverages.	X	<input type="checkbox"/>	<input type="checkbox"/>	Staff provides a supply of fluids to the hunger striker per policy B-221 Hunger Strikes.
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.	<input type="checkbox"/>	<input type="checkbox"/>	X	This component is only applicable for SPCs and CDFs. Staff records food and fluid intake on the Corizon Medical Services Food Flow sheet.
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	X	<input type="checkbox"/>	<input type="checkbox"/>	Staff utilizes the "Effects of Starvation" handout in persuasion attempts.
The medical staff has written procedures for treating hunger strikers.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical policy J-I-05.02, Hunger Strike, describes procedures for treating hunger strikers.
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remain current in evaluation and treatment techniques	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy F-322, Staff Referral for Non-Emergency Services, addresses meal refusal, reporting and documentation requirements, as well as follow-up.

### HUNGER STRIKES

**Policy:** All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.

☒ Acceptable

☐ Deficient

☐ At-Risk

☐ Repeat Finding

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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ACCESS TO MEDICAL CARE				
<b>Policy:</b> Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.				
Components	Y	N	N/A	Remarks
Facilities operate a health care facility in compliance with State and Local laws and guidelines.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility operates according to the state of Maine and local laws and guidelines. The facility was accredited by the American Correctional Association (ACA) in October 2013 and the National Commission on Correctional Health Care (NCHC) in April, 2015. The facility contracts with Corizon Medical Services (CMS) for the provision of health care services.
The facility's in-processing procedures for arriving detainees include medical screening.	X	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are screened by medical personnel in the booking area during in-processing procedures.
All detainees have access to and receive medical care.	X	<input type="checkbox"/>	<input type="checkbox"/>	All detainees have access to and receive routine medical care through the sick call process as explained in writing and orally in English and Spanish during orientation. Information is also included in the detainee handbook, and posted in booking and housing areas.
Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> <li>Secured in a locked area within the medical unit;</li> <li>With physical access restricted to authorized medical staff; and</li> <li>Procedurally, no copies made and placed in detainee files.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical records are kept apart from other files. Active records are kept in a locked room in the HSU with access restricted to medical personnel. Inactive records are kept in two small locked rooms, with restricted access, also in the HSU. No copies of medical records are made for placement in other detainee files.
The medical staff is large enough to provide, examine, and treat the facility's detainee population.	X	<input type="checkbox"/>	<input type="checkbox"/>	Health care is provided by both full time and part time medical staff including: health services administrator, physician, psychiatric, dentist, director of nursing, mid level practitioner, registered nurses, medication technicians, clerks, dental assistant and mental health professionals.
Where staff is used to distribute medication, a health care provider properly trains these officers.	<input type="checkbox"/>	<input type="checkbox"/>	X	This component is only applicable for SPCs and CDFs. Only medical staff distributes medication.

ACCESS TO MEDICAL CARE				
<b>Policy:</b> Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.				
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	X	<input type="checkbox"/>	<input type="checkbox"/>	Security staff is trained to respond to health related emergencies within a four minute response time. This training takes place during initial orientation and annually and is documented on employee training records.
The medical unit keeps written records of medication that is distributed.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff document medication distribution on medication administration records (MAR)
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	X	<input type="checkbox"/>	<input type="checkbox"/>	A copy of the current health record or a comprehensive transfer summary is transferred with the detainee.
Medical screening includes a Tuberculosis (TB) test. <ul style="list-style-type: none"> <li>• Every arriving detainee receives a TB test.</li> <li>• During the admission process.</li> <li>• Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility.</li> <li>• Detainees not screened are housed separate from the general population</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Newly arriving ICE detainees receive a tuberculosis (TB) testing upon admission in the booking area. Those not screened are housed separately from the general population.
All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> <li>• By a health care provider or specially trained officer;</li> <li>• Before a detainee's assignment to a housing unit</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component that requires a detainee to receive a mental health screening before being assigned to a housing unit is specific to SPCs and CDFs. All detainees receive a mental health screening upon arrival by a medical staff member.
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in the Special Management Unit have access to health care services.	X	<input type="checkbox"/>	<input type="checkbox"/>	As documented in the special management unit log books, nursing personnel make rounds, cell by cell, at least daily.
Staff provides detainees with health- services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> <li>• Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population.</li> <li>• Service-request slips are delivered in a timely fashion to the health care provider.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for staff to provide detainees with health services (sick call) request slips daily, upon request and the request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population is specific to SPCs and CDFs. Sick call slips are available in English and are distributed and received by nursing personnel on a daily basis.

ACCESS TO MEDICAL CARE				
<b>Policy:</b> Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.				
The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical personnel are on duty 24 hours a day, seven days a week. Medical policy J-E-08, Emergency Services, and facility policy F-311, Emergency Medical Services, outline plans for accessing outside medical attention.
A signed and dated consent form is obtained from a detainee before medical treatment is administered.	X	<input type="checkbox"/>	<input type="checkbox"/>	A consent form is required prior to the initiation of treatment, examination or procedure.
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical records are sealed and marked confidential.
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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## SUICIDE PREVENTION AND INTERVENTION

**Policy:** All detention staff working with ICE detainees will be trained to recognize suicide-risk indicators. Staff will handle potentially suicidal individuals with sensitivity, supervision, and referrals. A clinically suicidal detainee will receive preventive supervision and treatment.

Components	Y	N	N/A	Remarks
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	X	<input type="checkbox"/>	<input type="checkbox"/>	Suicide prevention training occurs during initial orientation, as documented in employee training records.
Training prepares staff to: <ul style="list-style-type: none"> <li>Recognize potentially suicidal behavior;</li> <li>Refer potentially suicidal detainees, following facility procedures;</li> <li>Understand and apply suicide-prevention techniques.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Training prepares staff to: recognize the U.S. Suicide Statistics and key components in suicide prevention in a correctional facility, recognize the characteristics of jails that can influence a detainee's thoughts of suicide; list at least five signs and symptoms of a possible suicidal inmate; identify times of increased suicide risk; identify events that can trigger a possible suicide; recognize the importance of early intervention for suicide prevention; and list steps to respond to an actively suicidal detainee.
A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. <ul style="list-style-type: none"> <li>Screening does not occur later than one working day after the detainee's arrival.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	A health care provider screens all detainees for suicide potential during the admission process.
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical policy J-G-05, Suicide Prevention, describes these procedures.
The facility has a designated isolation room for evaluation and treatment.	X	<input type="checkbox"/>	<input type="checkbox"/>	There are two designated isolation rooms in the HSU. Additionally, there are two rooms in the special management unit (SMU) that are designated isolation rooms.
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	X	<input type="checkbox"/>	<input type="checkbox"/>	In the HSU, there is a large window in the wall and in the door to the rooms. In the SMU, the rooms are on camera. Detainees are given suicide deterrent gowns, blankets and mattress pads.
Medical staff has approved the room for this purpose.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff has approved the rooms for this purpose.
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	X	<input type="checkbox"/>	<input type="checkbox"/>	Staff observe and document the status of the detainee at least once every 15 minutes.

☒ Acceptable
☐ Deficient
☐ At-Risk
☐ Repeat Finding

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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Auditor's Signature / Date

### TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

**Policy** All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally ill or injured or death of a detainee occurs. In addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.

☐ **Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.**

Components	Y	N	N/A	Remarks
The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's medical condition. <ul style="list-style-type: none"> <li>The detainee's location.</li> <li>The visiting hours and rules at that location.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility notifies ICE officials who in turn notify family members.
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not routinely accept detainees who are chronically or terminally ill. Should a detainee become chronically or terminally ill while at the facility, the detainee would be transferred to a more appropriate medical facility.
There is a policy addressing "Do Not Resuscitate Orders"	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical policy J-I-04-.01 addresses Do Not Resuscitate (DNR) orders.
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	X	<input type="checkbox"/>	<input type="checkbox"/>	Detainees with a DNR receive all medically appropriate therapeutic or palliative care.
The facility notifies the DHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical policy J-I-04, End of Life Decision Making, addresses proper notification procedures.
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. The guidelines include instructions for detainees who wish to have a living will other than the generic form the DHS provides or who wishes to appoint another to make advance decisions for him or her.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical policy J-I-04.01, Living Wills, Advance Directives and Organ Donation, describes these guidelines.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical policy J-A-10, Procedure in Event of an Inmate Death, and facility policy B-190, Death in the Facility, address proper notification in the event of a detainee death.
The facility has a policy and procedure to address the death of a detainee while in transport.	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy D-250 Transportation of Inmates, addresses the death of a detainee while in transport.

### TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

**Policy** All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally ill or injured or death of a detainee occurs. In addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.

☐ Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Y	N	N/A	Remarks
<p>The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as:</p> <ul style="list-style-type: none"> <li>Performance of an autopsy;</li> <li>Who will perform the autopsy;</li> <li>Obtaining state approved death certificates; and</li> <li>Local transportation of the body.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility policy B-190 Death in the Facility, addresses this component. In accordance with the guidelines set forth by the Attorney General's Office, the Office of the Medical Examiner is notified immediately. An autopsy is requested.</p>

☒ Acceptable
 ☐ Deficient
 ☐ At-Risk
 ☐ Repeat Finding

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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[Redacted Signature]

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 Date

## **Section III**

### *Security and Control Standards*



CONTRABAND				
<b>Policy:</b> All detention facilities will ensure the proper handling and disposal of all contraband. Documentation of contraband destruction is required.				
Components	Y	N	N/A	Remarks
The facility follows a written procedure for handling illegal contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	X	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component that requires staff to inventory, hold and report contraband when necessary to the proper authority for action/possible seizure is specific to SPCs and CDFs. The facility does complete the steps identified for action/possible seizure as provided in written procedures outlined in Policy D-220, Search Procedures.
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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Auditor's Signature / Date

DETENTION FILES				
<p><b>Policy:</b> Every facility will create a detention file for every ICE detainee booked into the facility, excluding only detainees scheduled to depart within 24 hours. The detention file will contain copies and, in some cases, the original of specified documents concerning the detainee's stay in the facility: classification sheet, medical questionnaire, property inventory sheet, disciplinary documents, etc.</p>				
Components	Y	N	N/A	Remarks
A detention file is created for every new arrival whose stay will exceed 24 hours.	X	<input type="checkbox"/>	<input type="checkbox"/>	A detention file is created for all detainees admitted to this facility.
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The detainee's detention file also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> <li>• Special requests</li> <li>• Any G-589s and/or I-77s closed-out during the detainee's stay</li> <li>• Disciplinary forms/Segregation forms</li> <li>• Grievances, complaints, and the disposition(s) of same</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	
The detention files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	X	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component that requires detention files to be in lockable cabinets with the keys limited to supervisors if the files are not maintained in a secure area is specific to SPCs and CDFs. The detention files are located in a locked cabinet in the intake area. All released files are kept in the records office within a secured area.
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.	X	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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## DISCIPLINARY POLICY

**Policy:** All facilities housing ICE detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.

Components	Y	N	N/A	Remarks
The facility has a written disciplinary system using progressive levels of reviews and appeals	X	<input type="checkbox"/>	<input type="checkbox"/>	Policy F-200, Inmate Disciplinary Procedures, outlines a progressive level of review and the process for appeals.
The facility rules state that disciplinary action shall not be capricious or retaliatory.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> <li>• corporal punishment</li> <li>• deviations from normal food service</li> <li>• clothing deprivation</li> <li>• bedding deprivation</li> <li>• denial of personal hygiene items</li> <li>• loss of correspondence privileges</li> <li>• deprivation of physical exercise</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policies Inmate Rights General, Supervision of Inmates, and Special Management Inmates address all of the bulleted items in this component.
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	X	<input type="checkbox"/>	<input type="checkbox"/>	Rules, sanctions and procedures are provided in the Facility Handbook.
Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	X	<input type="checkbox"/>	<input type="checkbox"/>	Investigations are completed and documented on the Disciplinary Board Cover Sheet.
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	X	<input type="checkbox"/>	<input type="checkbox"/>	Procedure B of policy F-200 details the process for informal resolution of minor infractions. Resolutions of such infractions are documented on the Minor Disciplinary Infraction form.
A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> <li>• Conducts hearings on all charges and allegations referred by the UDC</li> <li>• Considers written reports, statements, physical evidence, and oral testimony</li> <li>• Hears pleadings by detainee and staff representative</li> <li>• Bases its findings on the preponderance of evidence</li> <li>• Imposes only authorized sanctions</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted sections of this component are specific to SPCs and CDFs. A review of the Disciplinary Board Hearing form demonstrated all elements of this component were satisfied.

☒ **Acceptable**

☐ **Deficient**

☐ **At-Risk**

☐ **Repeat Finding**

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### EMERGENCY (CONTINGENCY) PLANS

**Policy** All facilities holding ICE detainees will respond to emergencies with a predetermined standardized plan to minimize the harming of human life and the destruction of property. It is recommended that SPCs and CDFs enter into agreement, via Memorandum of Understanding (MOU), with federal, local and state agencies to assist in times of emergency.

Components	Y	N	N/A	Remarks
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	X	<input type="checkbox"/>	<input type="checkbox"/>	The Accreditation Manager is responsible for emergency plans and their implementation.
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	X	<input type="checkbox"/>	<input type="checkbox"/>	The emergency plans for this facility identifies the role of medical staff.
The plans address the following issues: <ul style="list-style-type: none"> <li>• Confidentiality</li> <li>• Accountability (copies and storage locations)</li> <li>• Annual review procedures and schedule</li> <li>• Revisions</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The front page of the Emergency Plans Manual has a confidentiality statement. One copy is maintained in Master Control. Procedures for a review are noted in Policy A-150 and a memo was provided dated January 04, 2016 indicating an annual review was completed. The most recent specific update of Policy B-125 was dated July, 2010.

☒ **Acceptable**
☐ **Deficient**
☐ **At-Risk**
☐ **Repeat Finding**

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significant facts, observations, other sources used, etc.)

AUDITOR'S Signature / Date

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## ENVIRONMENTAL HEALTH AND SAFETY

**Policy:** Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Y	N	N/A	Remarks
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	X	<input type="checkbox"/>	<input type="checkbox"/>	A correctional officer is assigned as an inventory control specialist to oversee and distribute non-toxic cleaning materials. Hazardous materials are confined to food services.
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: <ul style="list-style-type: none"> <li>Wear personal protective</li> <li>Equipment.</li> <li>Report hazards and spills to the</li> <li>designated official.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Personal protective equipment is available and worn by personnel. Detainees are prohibited by policy from participation in biohazard clean-up activities. Policy requires reporting of hazards and spills to designated supervisors.
The MSDSs are readily accessible to staff and detainees in the work areas.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> <li>quantities are limited.</li> <li>Staff always supervises detainees using these substances.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility has instituted an Exposure Control Plan to limit quantities of hazardous materials throughout the facility and respond to hazardous materials exposure. Cleaning operation requiring toxic/caustic materials are completed under direct staff supervision.
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility has sufficient ventilation and provides and ensures clean air exchanges throughout all buildings.	X	<input type="checkbox"/>	<input type="checkbox"/>	Room temperatures were comfortable and air felt fresh throughout the facility.
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	X	<input type="checkbox"/>	<input type="checkbox"/>	
All toxic and caustic materials stored in their original containers in a secure area.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	X	<input type="checkbox"/>	<input type="checkbox"/>	A program has been created specifically to train facility staff in the use, storage and disposal of hazardous materials entitled Jail Hazard Communications program.
A technically qualified officer conducts the fire and safety inspections.	X	<input type="checkbox"/>	<input type="checkbox"/>	The fire safety officer is a certified fire fighter completing levels I and II with over 5 years of service as a volunteer firefighter.

### ENVIRONMENTAL HEALTH AND SAFETY

**Policy:** Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Y	N	N/A	Remarks
The facility has an approved fire prevention, control, and evacuation plan.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility plan was most recently approved by the State of Maine Fire Marshal on April 11, 2015.
Written procedures regulate the handling and disposal of used needles and other sharp objects.	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy E-205, Tools and Hazardous Materials Control, addresses the handling and disposal of used needles and sharp objects.
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy, Exposure Control Plan, establishes training requirements for entry level and veteran employees.
The facility follows standard cleaning procedures.	X	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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Attorney's Signature: \_\_\_\_\_



### HOLD ROOMS IN DETENTION FACILITIES

**Policy:** Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.

Components	Y	N	N/A	Remarks
All detainees are given a pat down search for weapons or contraband before being placed in the room.	X	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are pat searched in the sally port prior to entering the secure portion of the facility and again immediately upon entrance.
There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.	X	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that requires the evacuation plan to include a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation is specific to SPCs and CDFs. A designated officer is not identified to remove detainees from hold rooms in an emergency. The facility has a written evacuation plan. This plan is outlined in policy B-120 Emergency Evacuation Plan. Emergency evacuation routes are posted.
Detainees under the age of 18 are not held with adult detainees.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not accept anyone under the age of 18.
Detention in hold rooms is limited to 12 hours.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Male and females are segregated from each other.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.) <ul style="list-style-type: none"> <li>Hold rooms are irregularly monitored every 15 minutes.</li> <li>Unusual behavior or complaints are noted.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	

☒ **Acceptable**

☐ **Deficient**

☐ **At-Risk**

☐ **Repeat Finding**

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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Auditor's Signature / Date



**KEY AND LOCK CONTROL  
(SECURITY, ACCOUNTABILITY AND MAINTENANCE)**

**Policy** It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks.

Components	Y	N	N/A	Remarks
The security officer, or equivalent in IGSA's, provides training to employees in key control.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The security officer, or equivalent in IGSA's, maintains inventories of all keys, locks and locking devices.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility now maintains inventory of keys, locks and locking devices maintained by the designated maintenance person.
Facility policies and procedures address the issue of compromised keys and locks.	X	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy details actions to be taken in the event a key or lock is compromised.
Padlocks and/or chains are prohibited from use on cell doors.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	X	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for keys to be physically counted daily is specific to SPCs and CDFs. Key are physically counted at the start of each shift. Additionally, the facility's policy and procedures details a system to ensure key accountability.
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

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Auditor's Signature / Date

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### POPULATION COUNTS

**Policy:** All detention facilities shall ensure around-the-clock accountability for all detainees. This requires that they conduct at least one formal count of the detainee population per shift, with additional formal and informal counts conducted as necessary.

Components	Y	N	N/A	Remarks
Staff conducts a formal count at least once each shift.	X	<input type="checkbox"/>	<input type="checkbox"/>	
A face-to-photo count follows each unsuccessful recount.	X	<input type="checkbox"/>	<input type="checkbox"/>	The policy governing counts requires face-to-face count following an unsuccessful count. Policy D-230 Inmate Counting
The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.	X	<input type="checkbox"/>	<input type="checkbox"/>	Both the Master Control Officer and the Intake Officer maintain an out-count record.
Written procedures cover informal and emergency counts. <ul style="list-style-type: none"> <li>• They followed during informal counts.</li> <li>• During emergencies.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Policy D-230, Inmate Counts, provides procedures for informal and emergency counts.
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

Auditor's Signature / Date

*7/17/17*

### POST ORDERS

**Policy:** ICE provides officers all necessary guidance for carrying out their duties. This guidance includes the post orders established for every post, which are reviewed at least annually, and given to each officer upon assignment to that post.

Components	Y	N	N/A	Remarks
Every Fixed post has a set of post orders.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	<input type="checkbox"/>	<input type="checkbox"/>	X	This component is only applicable for SPCs and CDFs. This facility has no posts that require an officer to be armed.
The IGSA maintains a complete set (central file) of post orders.	X	<input type="checkbox"/>	<input type="checkbox"/>	A central file of all Post Orders is maintained in the Accreditation Manager's office.
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	X	<input type="checkbox"/>	<input type="checkbox"/>	A memo dated January 4, 2016 initialed by the Jail Administrator is available indicating all policies and post orders have been reviewed.
Armed-post post orders provide instructions for escape attempts.	<input type="checkbox"/>	<input type="checkbox"/>	X	The facility does not have any armed posts.
<input checked="" type="checkbox"/> <b>Acceptable</b> <input type="checkbox"/> <b>Deficient</b> <input type="checkbox"/> <b>At-Risk</b> <input type="checkbox"/> <b>Repeat Finding</b>				

(b)(6),(b)(7)(C)

...cant facts, observations, other sources used, etc.)

Auditor's Signature / Date

*7/17/17*

## SECURITY INSPECTIONS

**Policy:** Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations.

Components	Y	N	N/A	Remarks
The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> <li>• Posts to be inspected</li> <li>• Required inspection forms</li> <li>• Frequency of inspections</li> <li>• Guidelines for checking security features</li> <li>• Procedures for reporting weak spots, inconsistencies, and other areas needing improvement</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The portion of the component that requires the security inspection policy to specify the posts to be inspected and the required inspection form is specific to SPCs and CDFs. The facility policy requires all posts to be checked and recorded in the logbook. Additionally, weak spots are to be recorded both in the log book and in the "Hot Book", which identifies significant events or issues. The facility also utilizes inspection forms.
All visits are officially recorded in a visitor logbook or electronically recorded.	X	<input type="checkbox"/>	<input type="checkbox"/>	A sign-in/sign-out sheet is maintained documenting visitors.
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	X	<input type="checkbox"/>	<input type="checkbox"/>	Tools are inventoried by the Lobby Officer before entering and departing the facility.
Written procedures govern searches of detainee housing units and personal areas.	X	<input type="checkbox"/>	<input type="checkbox"/>	Procedures governing the search of detainee housing units and personal areas are outlined in policy D-220, Search Procedures, and in policy D-240, Inmate Supervision and Relations.

☒ **Acceptable**
     
 ☐ **Deficient**
     
 ☐ **At-Risk**
     
 ☐ **Repeat Finding**

(b)(6),(b)(7)(C) (Significant facts, observations, other sources used, etc.)

Inspector's Signature / Date

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation				
<p><b>Policy:</b> The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).</p>				
Components	Y	N	N/A	Remarks
<p>The detainees are provided:</p> <ul style="list-style-type: none"> <li>Barbering services;</li> <li>Recreation privileges in accordance with the "Detainee Recreation" standard;</li> <li>Non-legal reading material;</li> <li>Religious material;</li> <li>The same correspondence privileges as detainees in the general population;</li> <li>Telephone access similar to that of the general population; and</li> </ul> <p>Personal legal material.</p>	X	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Procedures comply with the "Visitation" standard.</p> <ul style="list-style-type: none"> <li>The detainee retains visiting privileges; and</li> </ul> <p>The visiting room is available during normal visiting hours.</p>	X	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Visits from clergy are allowed.</p>	X	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Detainees have the same law-library access as the general population.</p> <ul style="list-style-type: none"> <li>Are they required to use the law library:  <input checked="" type="checkbox"/> Separately  or  <input type="checkbox"/> As a group?</li> </ul> <p>Are legal materials brought to them?</p>	X	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in Administrative Segregation have access to a cart with legal materials or may request specific legal materials from the Librarian.
<p>SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU.</p> <ul style="list-style-type: none"> <li>Staff completes the form at the end of each shift.</li> </ul> <p>CDFs and IGSA facilities use Form I-888 (or local equivalent).</p>	X	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that requires the use of the "SMU Housing Record" (I-888) immediately upon a detainee's placement in the SMU and for staff to complete the form at the end of each shift is specific to SPCS and CDFs. This facility does not use the I-888, but uses a form entitled Administrative Segregation Report coupled with a form entitled Activity Report for each detainee in Administrative segregation.

<b>SPECIAL MANAGEMENT UNIT (SMU)</b> <b>Administrative Segregation</b>				
<b>Policy:</b> The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit (Disciplinary Segregation)" standard).				
Components	Y	N	N/A	Remarks
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. Detainees are placed in the SMU (administrative) in accordance with written criteria.	X	<input type="checkbox"/>	<input type="checkbox"/>	Policy D-243, Special Management Inmates, provides written criteria for the placement of detainees in Administrative Segregation as do policies in the D-100 series addressing classification.
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. A copy of the order given to the detainee within 24 hours.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSA's) any time a detainee's stay in administrative detention exceeds 30 days. Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility's policy requires ICE be notified whenever a detainee is placed on Administrative Segregation. We have also revised policy D-243 Special Management Inmates, to reflect the notification of the local ICE if an ICE detainee is on administrative segregation more than 30 days.
The OIC (or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. <ul style="list-style-type: none"> <li>A written record is made of the decision and the justification.</li> <li>The detainee receives a copy of this record.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	The Classification team convenes once every seven days and reviews the status of detainees housed on Administrative Segregation. A written report is completed with the detainee receiving a copy. The Classification Team meeting is chaired by a Lieutenant.
A health care professional visits every detainee at least three times a week. <ul style="list-style-type: none"> <li>The shift supervisor visits each detainee daily.</li> <li>Weekends and holidays.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is on the unit at least daily and supervisory staff conduct rounds on the unit twice per shift.
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility considers privileges for general population detainees to be commissary, telephone use and television viewing all of which are provided to detainees housed in Administrative Segregation.
All cells are equipped with beds. Every bed is securely fastened to the floor or wall.	X	<input type="checkbox"/>	<input type="checkbox"/>	Each bed is secured and a mattress is provided.
The SMU maintains a permanent log. <ul style="list-style-type: none"> <li>Detainee-related activity, e.g., meals served, recreation, visitors etc.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	An electronic log book is maintained in this housing unit.

**SPECIAL MANAGEMENT UNIT (SMU)**  
**Administrative Segregation**

**Policy:** The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).

Components	Y	N	N/A	Remarks
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

(b)(6);(b)(7)(C)

...cant facts, observations, other sources used, etc.)

\_\_\_\_\_  
 Auditor's Signature / Date

7/12/17



SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)				
<b>Policy:</b> Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation, the other for detainees being segregated for disciplinary reasons.				
Components	Y	N	N/A	Remarks
Officers placing detainees in disciplinary segregation follow written procedures.	X	<input type="checkbox"/>	<input type="checkbox"/>	Procedures are outlined in policy F-200, Inmate Disciplinary Procedures.
The sanctions for violations committed during one incident are limited to 60 days.	X	<input type="checkbox"/>	<input type="checkbox"/>	
A completed Disciplinary Segregation Order accompanies the detainee into the SMU. The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.	X	<input type="checkbox"/>	<input type="checkbox"/>	The Disciplinary Segregation form is provided to the officer, and the detainee is provided a copy of the Disciplinary Hearing Board form.
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. After each formal review, the detainee receives a written copy of the decision and supporting reasons.	X	<input type="checkbox"/>	<input type="checkbox"/>	The section of the component that requires for detainees to receive a copy of the decision and supporting reasons after each formal review is specific to SPCs and CDFs. Supervisory staff reviews are conducted on detainees housed on Disciplinary Segregation.
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	X	<input type="checkbox"/>	<input type="checkbox"/>	Each bed is securely fastened to the floor.
When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	X	<input type="checkbox"/>	<input type="checkbox"/>	Incident reports are filed to justify such action and must be reviewed and approved by a supervisor.
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. Food is not used as punishment.	X	<input type="checkbox"/>	<input type="checkbox"/>	
SMU detainees have law library access. <ul style="list-style-type: none"> <li>Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing.</li> <li>Legal material brought to individuals in the SMU on a case-by-case basis.</li> <li>Staff documents every incident of denied access to the law library.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Legal materials are provided to disciplinary segregation detainees on a cart and specific requests for legal materials will be honored.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)				
<b>Policy:</b> Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.				
Components	Y	N	N/A	Remarks
When phone access is limited by number or type of calls, limits do not apply to the following: <ul style="list-style-type: none"> <li>• Calls about the detainee's immigration case or other legal matters.</li> <li>• Calls to consular/embassy officials.</li> <li>• Calls during family emergencies (as determined by the OIC/Warden).</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Access to the phone is available to the detainee daily during their hour for recreation. Supervisors may approve phone call for family emergencies.
Detainees receive, unless documented as a threat to security: <ul style="list-style-type: none"> <li>• Barbering services;</li> <li>• Recreation privileges;</li> <li>• Other-than-legal reading material;</li> <li>• Religious material;</li> <li>• The same correspondence privileges as other detainees; and</li> <li>• Personal legal material.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	
A health care professional visits every detainee in disciplinary segregation every day, Monday through Friday. <ul style="list-style-type: none"> <li>• The shift supervisor visit each segregated detainee daily</li> <li>• Weekends and holidays.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	
Visits from clergy are allowed. <ul style="list-style-type: none"> <li>• The clergy member given the option of visiting/not visiting the segregated detainee.</li> <li>• Violent/uncooperative detainees denied access to religious services when safety and security would otherwise be affected.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	
SMU detainees receive legal visits, as provided in the "Visitation" standard. Legal service providers are notified of security concerns arising before a visit.	X	<input type="checkbox"/>	<input type="checkbox"/>	Weekend and holiday legal visits are by appointment, hours are 6:00pm to 8:00pm. ICE detainees are afforded legal visits based on posted visitation schedule upon request.
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

(b)(6),(b)(7)(C)

is, observations, other sources used, etc.)

12/17

TOOL CONTROL				
<b>Policy:</b> It is the policy of all facilities that all employees shall be responsible for complying with the tool control policy. The Maintenance Supervisor shall maintain a computer generated or typewritten Master Inventory list of tools and equipment and the location in which tools are stored. These inventories shall be current, filed and readily available for tool inventory and accountability during an audit.				
Components	Y	N	N/A	Remarks
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	X	<input type="checkbox"/>	<input type="checkbox"/>	The Captain of Security and Operations is responsible for tool control.
The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> <li>The policy sets minimum time lines for physical inventory and all necessary documentation.</li> <li>ICE facilities use AMIS bar code labels when required.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Policy E-205 requires the daily inventory of all tools. Kitchen utensils are inventoried every day. Medical instruments are inventoried on each shift and dental instruments are inventoried once a week.
Each facility has procedures for the issuance of tools to staff and detainees.	X	<input type="checkbox"/>	<input type="checkbox"/>	The Maintenance Department uses a chit system to control the issuance of tools to staff. No tools are issued to detainees from the Maintenance Department.
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)



1/7

**TRANSPORTATION**  
**(Land Transportation)**

**Policy** The Immigration and Naturalization Service will take all necessary precautions to protect the lives, safety, and welfare of our officers, the general public, and those in ICE custody during the transportation of detainees. Standards have been established for professional transportation under the supervision of experienced and trained Detention Enforcement Officers or authorized contract personnel.

**X Standard NA: Check this box if all ICE Transportation are handled only by the ICE Field Office or Sub-Office in control of the detainee case.**

Components	Y	N	N/A	Remarks
Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transporting officers: <ul style="list-style-type: none"> <li>• Limit driving time to 10 hours in any 15 hour period;</li> <li>• Drive only after eight consecutive off-duty hours;</li> <li>• Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours;</li> <li>• Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days;</li> <li>• During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ **Acceptable**
         
 ☐ **Deficient**
         
 ☐ **At-Risk**
         
 ☐ **Repeat Finding**

**Remarks:** (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)



*7/17/17*

## USE OF FORCE

**Policy:** The U.S. Department of Homeland Security authorizes the use of force only as a last alternative after all other reasonable efforts to resolve a situation have failed. Only that amount of force necessary to gain control of the detainee, to protect and ensure the safety of detainees, staff and others, to prevent serious property damage and to ensure institution security and good order may be used. Physical restraints necessary to gain control of a detainee who appears to be dangerous may be employed when the detainee:

Components	Y	N	N/A	Remarks
Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	X	<input type="checkbox"/>	<input type="checkbox"/>	Provisions for immediate use of force are outlined in Sheriff's Policy 0-2 Use of Force dated October, 2015.
There is a use of force policy outlining immediate and calculated use of force, and confrontation avoidance.	X	<input type="checkbox"/>	<input type="checkbox"/>	We do provide annual use of force training which includes de-escalation which would be akin to confrontation avoidance.
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility subscribes to the prescribed Confrontation Avoidance Procedures. <ul style="list-style-type: none"> <li>Ranking detention official, health professional, and others confer before every calculated use of force.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	In cases where calculated use of force is possible, a shift supervisor will confer with a medical professional(s) prior to force being used.
Staff: <ul style="list-style-type: none"> <li>Does not use force as punishment.</li> <li>Attempts to gain the detainee's voluntary cooperation before resorting to force</li> <li>Uses only as much force as necessary to control the detainee.</li> <li>Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	A review of completed incident reports and use of force reports indicate compliance with this component.
Staff members are trained in the performance of the Use-of-Force Team Technique.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Standard procedures associated with using four/five point restraints include: <div style="background-color: black; color: red; padding: 5px; margin-top: 10px;">(b)(7)(E)</div>	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a restraint chair when needed and under close supervision. Checks are required every 15 minutes by officers, every hour by medical staff and every two hours by security supervisor.

USE OF FORCE				
<p><b>Policy:</b> The U.S. Department of Homeland Security authorizes the use of force only as a last alternative after all other reasonable efforts to resolve a situation have failed. Only that amount of force necessary to gain control of the detainee, to protect and ensure the safety of detainees, staff and others, to prevent serious property damage and to ensure institution security and good order may be used. Physical restraints necessary to gain control of a detainee who appears to be dangerous may be employed when the detainee:</p>				
Components	Y	N	N/A	Remarks
<ul style="list-style-type: none"> <li>When qualified medical staff are not immediately available, staff position the detainee "face-up."</li> </ul>				
The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	X	<input type="checkbox"/>	<input type="checkbox"/>	
All use-of-force incidents are documented and reviewed.	X	<input type="checkbox"/>	<input type="checkbox"/>	Completed Use of Force Reports forms are reviewed and signed by the shift supervisor and/or lieutenant, captain, jail administrator, and chief deputy to the sheriff.
All detainee checks are logged.	X	<input type="checkbox"/>	<input type="checkbox"/>	
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	X	<input type="checkbox"/>	<input type="checkbox"/>	
When the OIC authorizes use of non-lethal weapons: <ul style="list-style-type: none"> <li>Medical staff is consulted before staff use pepper spray/non-lethal weapons.</li> <li>Medical staff review the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	In cases where calculated use of force is possible, the medical unit will be consulted prior to administering OC.
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Special precautions are taken when restraining pregnant detainees. Medical personnel are consulted	X	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Remarks: (b)(6), (b)(7)(C) [redacted] (facts, observations, other sources used, etc.)

Audited



### STAFF DETAINEE COMMUNICATIONS

**Policy:** Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainee and to permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.

Components	Y	N	N/A	Remarks
ICE Detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Scheduled visits are posted in ICE detainee areas.	X	<input type="checkbox"/>	<input type="checkbox"/>	The facility has requested a scheduled visit for posting in the housing areas.
The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	X	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that requires weekly announced and unannounced visits is specific to CPCs and CDFs. The assigned IEA conducts weekly announced and unannounced visits.
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	X	<input type="checkbox"/>	<input type="checkbox"/>	
ICE/DRO staff respond to a detainee request from a facility within 72 hours.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility treats detainee correspondence to ICE/ERO staff as Special Correspondence.	X	<input type="checkbox"/>	<input type="checkbox"/>	
ICE information request Forms are available at the IGSA for use by ICE detainees.	X	<input type="checkbox"/>	<input type="checkbox"/>	ICE information request forms are located on each housing unit for detainee use.


☒ **Acceptable**

☐ **Deficient**

☐ **At-Risk**

☐ **Repeat Finding**

Re: (b)(6), (b)(7)(C) Significant facts, observations, other sources used, etc.)

At:  Date: 7/17/17



# **DETAINEE TRANSFER STANDARD**

**Policy:** ICE will make all necessary notifications when a detainee is transferred. If a detainee is being transferred via the Justice Prisoner Alien Transportation System (JPATS), ICE will adhere to JPATS protocols. In deciding whether to transfer a detainee, ICE will take into consideration whether the detainee is represented before the immigration court. In such cases, the Field Office Director will consider the detainee's stage within the removal process, whether the detainee's attorney is located within reasonable driving distance of the facility, and where the immigration court proceedings are taking place.

Components	Y	N	N/A	Remarks
The detainee is provided with a completed Detainee Transfer Notification Form.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Meals are provided when transfers occur during normally schedule meal times.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Facility policy mandates that: <ul style="list-style-type: none"> <li>Times and transfer plans are never discussed with the detainee prior to transfer.</li> <li>The detainee is not notified of the transfer until immediately prior to departing the facility.</li> <li>The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	Confidentiality of transfer plans are maintained by facility staff. Detainees are not notified in advance.
For medical transfers: <ul style="list-style-type: none"> <li>The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer.</li> <li>Medical transfers are coordinated through the local ICE/ERO office.</li> <li>A medical transfer summary is completed and accompanies the detainee.</li> </ul>	X	<input type="checkbox"/>	<input type="checkbox"/>	ICE approves and coordinates all medical transfers.
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	<input type="checkbox"/>	<input type="checkbox"/>	X	ICE Health Services Corps staff is not assigned to this facility.
For medical transfers, transporting officers receive instructions regarding medical issues.	X	<input type="checkbox"/>	<input type="checkbox"/>	

☒ **Acceptable**

☐ **Deficient**

☐ **At-Risk**

☐ **Repeat Finding**

Remarks: (b)(6),(b)(7)(C) Significant facts, observations, other sources used, etc.)

Approved: [Signature] Date: 7/12/17

The following items must be inspected for compliance with those Justice Core Standards not covered by the ICE Detention Standards:

<b>Standard – Policy Development and Monitoring</b>			
<b>Item</b>	<b>Y</b>	<b>N</b>	<b>N/A</b>
1 Written Policy and Procedures are in place to provide staff with the necessary information to operate and maintain the facility on a daily basis and in accordance with local, state, and federal law	X	<input type="checkbox"/>	<input type="checkbox"/>
2 Written policy and procedure are reviewed annually and updated accordingly	X	<input type="checkbox"/>	<input type="checkbox"/>
<b>Standard – Reporting Requirement</b>			
3 The facility provides for a system of monitoring through internal audits and reviews	X	<input type="checkbox"/>	<input type="checkbox"/>
4 The internal administrative audit is separate from any external audits or reviews	X	<input type="checkbox"/>	<input type="checkbox"/>
5 Audit or inspection reports identify areas of concern, identify necessary corrective action, and provide for a system follow-up	X	<input type="checkbox"/>	<input type="checkbox"/>
6 Audit and Inspection reports are maintained on file until at least the next review is conducted	X	<input type="checkbox"/>	<input type="checkbox"/>
<b>Standard – Direct Supervision</b>			
7 To the extent Possible, physical plant design facilitates continuous personal contact and interaction between staff and detainees in the housing unit and recreation / leisure areas.	X	<input type="checkbox"/>	<input type="checkbox"/>
8 Written policies and procedures are in place that outline a comprehensive program that promotes and encourages staff/detainee communications. A daily rotation schedule should be established to ensure adequate staff coverage is provided throughout the meal.	X	<input type="checkbox"/>	<input type="checkbox"/>
<b>Standard – Cultural Diversity</b>			
9 Staff are provided appropriate annual cultural diversity or sensitivity training. Such training is designed and implemented in a fashion that will further enhance staff members' ability to communicate with detainees in an effective manner.	X	<input type="checkbox"/>	<input type="checkbox"/>

**DOJ Core Standards - Rating**  
**IGSA's Only**

☒ Acceptable   ☐ Deficient   ☐ Repeat Deficiency   ☐ At-Risk

(b)(6),(b)(7)(C)

significant facts, observations, other sources used, etc.)

Inspector's Signature / Date

## SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

**Policy:** This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Y	N	N/A	Remarks
The facility has a Sexual Abuse and Assault Prevention and Intervention Program consistent with the ICE Zero Tolerance Policy.	X	<input type="checkbox"/>	<input type="checkbox"/>	Jail policy A-144 Sexual Assault addresses this component.
All staff are trained during orientation and in annual refresher training in the prevention and intervention areas required by the Detention Standard.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility maintains written documentation verifying employee, volunteer, and contractor training.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are informed about the program in facility orientation and in the detainee handbook (or equivalent).	X	<input type="checkbox"/>	<input type="checkbox"/>	
The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential, and housed and counseled accordingly.	X	<input type="checkbox"/>	<input type="checkbox"/>	
A detainee who is subjected to sexual abuse or assault is not returned to general population until proper re-classification, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault, is completed.	X	<input type="checkbox"/>	<input type="checkbox"/>	
There is prompt and effective intervention when any detainee is sexually abused or assaulted, and policy and procedures for required chain-of-command and immediate ICE reporting.	X	<input type="checkbox"/>	<input type="checkbox"/>	
The facility uses a coordinated, multidisciplinary team approach to responding to sexual abuse, such as a sexual assault response team (SART), which includes a medical practitioner, a mental health practitioner, a security staff member, and an investigator from the assigned investigative entity, as well as representatives from outside entities that provide relevant services and expertise.	X	<input type="checkbox"/>	<input type="checkbox"/>	Jail policy A-144 Sexual Assault addresses this component along with Corizon Medical Services policy J-B-04.11 Sexual Assault Reporting and J-B-05.00 Sexual Assault.

## SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

**Policy:** This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Y	N	N/A	Remarks
Care is taken to place a victimized detainee in a supportive environment that represents the least restrictive housing option available (e.g. protective custody), but victims are not held for longer than five days in any type of administrative segregation except in highly unusual circumstances or at the request of the detainee.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Staff suspected of perpetrating sexual abuse or assault are removed from all duties requiring detainee contact pending the outcome of an investigation.	X	<input type="checkbox"/>	<input type="checkbox"/>	
When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.	X	<input type="checkbox"/>	<input type="checkbox"/>	
When there is an alleged or proven sexual assault, the required notifications are promptly made to facility supervisors and ICE management.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	X	<input type="checkbox"/>	<input type="checkbox"/>	
Tracking statistics and reports are readily available for review by the inspectors.	X	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

**Remarks:** (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

\_\_\_\_\_  
Auditor's Signature / Date

## U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT

### 11065.1: Review of the Use of Segregation for ICE Detainees

Issue Date: September 4, 2013

Effective Date: September 4, 2013

Superseded: N/A

Federal Enterprise Architecture Number: 300-112-002b

1. **Purpose/Background.** This directive establishes policy and procedures for U.S. Immigration and Customs Enforcement (ICE) review of ICE detainees placed into segregated housing.

This directive is intended to complement the requirements of the 2011 Performance-Based National Detention Standards (PBND5 2011), the 2008 Performance-Based National Detention Standards (PBND5 2008), the 2000 National Detention Standards (NDS), and other applicable ICE policies.

The most recent articulation of ICE policy governing segregation is the PBND5 2011 standard "Special Management Units" (Standard 2.12), which establishes the responsibilities of detention facility staff with respect to segregation placement, review, and notification to ICE, and which also articulates ICE policy regarding appropriate management of segregated detainees. Also relevant is the PBND5 2011 standard "Disciplinary System" (Standard 3.1) which prescribes appropriate levels of disciplinary segregation for various offenses.

2. **Policy.** Placement of detainees in segregated housing is a serious step that requires careful consideration of alternatives. Placement in segregation should occur only when necessary and in compliance with applicable detention standards. In particular, placement in administrative segregation due to a special vulnerability should be used only as a last resort and when no other viable housing options exist.

ICE shall ensure the safety, health, and welfare of detainees in segregated housing in its immigration detention facilities. Consistent with the agency's detention standards and relevant special housing policies, ICE shall take additional steps to ensure appropriate review and oversight of decisions to detain detainees in segregated housing for over 14 days, or placements in segregation for any length of time in the case of detainees for whom heightened concerns exist based on known special vulnerabilities and other factors related to the detainee's health or the risk of victimization. The security and safety of ICE employees, facility staff members, detainees, and the public remains the first consideration in the exercise of the procedures and requirements of this Directive.

**3. Definitions.** The following definitions apply for the purposes of this Directive:

- 3.1. Administrative Segregation.** Administrative segregation is a non-punitive form of separation from the general population for administrative reasons. Administrative segregation is authorized only as necessary to ensure the safety of the detainee, facility staff, and other detainees; the protection of property; or the security or good order of the facility, and therefore should be for the briefest term and under the least restrictive conditions practicable, consistent with the rationale for placement. Generally, detainees in administrative segregation shall receive the same privileges as detainees housed in the general population, consistent with safety and security concerns. Administrative segregation may be necessary for, among other reasons, detainees requiring or requesting protective custody from others who may be likely to harm them; detainees awaiting an investigation or hearing for a violation of facility rules; detainees scheduled for release, removal, or transfer within 24 hours; or detainees presenting a clear threat to the security of the facility.
- 3.2. Disciplinary Segregation.** Disciplinary segregation is a punitive form of separation from the general population for disciplinary reasons. Disciplinary segregation is authorized only pursuant to the order of a facility disciplinary panel, following a hearing in which the detainee is determined to have committed serious misconduct in violation of a facility rule, and only consistent with the Disciplinary Severity Scale from the applicable ICE detention standards, and only when alternative dispositions would inadequately regulate detainee behavior.
- 3.3. Special Vulnerabilities.** Detainees with special vulnerabilities include those who are known to be suffering from mental illness or serious medical illness; who have a disability or are elderly, pregnant, or nursing; who would be susceptible to harm in general population due in part to their sexual orientation or gender identity; or who have been victims – in or out of ICE custody – of sexual assault, torture, trafficking, or abuse.

**4. Responsibilities.**

**4.1. The ERO Custody Management Division (CMD) has responsibilities under:**

- 1) Section 5.2 (Segregation Placements Related to Disability, Medical or Mental Illness, Suicide Risk, Hunger Strike, Status as a Victim of Sexual Assault, or other Special Vulnerability);
- 2) Section 7.2 (Custody Management Division);
- 3) Section 7.5 (Detention Monitoring Council); and
- 4) Section 8 (Training).

**4.2. The ERO Field Operations Division has responsibilities under:**

- 1) Section 7.1 (ERO Field Operations);
- 2) Section 7.5 (Detention Monitoring Council); and
- 3) Section 8 (Training).

**4.3. ERO Field Office Directors (FODs) have responsibilities under:**

- 1) Section 5.1 (Extended Segregation Placements);
- 2) Section 5.2 (Segregation Placements Related to Disability, Medical or Mental Illness, Suicide Risk, Hunger Strike, Status as a Victim of Sexual Assault, or other Special Vulnerability);
- 3) Section 5.3 (Field Office Reports to ICE Headquarters);
- 4) Section 5.4 (Notification of a Detainee's Release from Segregation); and
- 5) Section 6 (Facility Compliance).

**4.4. The ICE Health Service Corps (IHSC) has responsibilities under:**

- 1) Section 5.1 (Extended Segregation Placements);
- 2) Section 5.2 (Segregation Placements Related to Disability, Medical or Mental Illness, Suicide Risk, Hunger Strike, Status as a Victim of Sexual Assault, or other Special Vulnerability);
- 3) Section 7.3 (IHSC Coordination and Review);
- 4) Section 7.5 (Detention Monitoring Council); and
- 5) Section 8 (Training).

**4.5. The Office of Detention Policy and Planning (ODPP) has responsibilities under:**

- 1) Section 7.4 (Office of Detention Policy and Planning); and
- 2) Section 7.5 (Detention Monitoring Council).

**4.6. The Detention Monitoring Council (DMC) has responsibilities under:**

- 1) Section 7.5 (Detention Monitoring Council).

**4.7. The Segregation Review Coordinator has responsibilities under:**



- 1) Section 7.5 (Detention Monitoring Council).

## **5. Field Review of Detainee Segregation Status.**

### **5.1. Extended Segregation Placements.**

- 1) The FOD shall take steps to ensure that he or she is notified in writing by the facility administrator whenever a detainee has been held continuously in segregation for 14 days, 30 days, and at every 30-day interval thereafter, or has been held in segregation for 14 days out of any 21 day period.
- 2) ICE personnel, including IHSC personnel and Detention Service Managers (DSMs), should also notify FODs whenever they become aware of a detainee who meets these criteria and has not yet been the subject of a notification to the FOD.
- 3) Upon receipt of such notification, the FOD shall immediately commence a review of the detainee's segregation case, including, where relevant, the full detention file and EARM records.
- 4) In cases of administrative segregation, the review shall include an assessment of whether the current placement is appropriate based on the applicable detention standards (including the substantive grounds for placement and the procedural requirements for status reviews) and ICE policies, including:
  - a) Whether the placement is based on a specified threat to the safety of the detainee or others, or to the secure and orderly operation of the facility. The facility must have articulated the facts behind the placement decision;
  - b) Whether a supervisory officer completed the administrative segregation order prior to placement, with a copy immediately provided to the detainee;
  - c) Whether documented reviews by a supervisor, including an interview with the detainee, have occurred within the first 72 hours of placement into segregation and every week thereafter; and
  - d) Whether, as part of the documented reviews, the facility administrator or assistant administrator has provided written approval of any decision to continue involuntary segregation of a detainee for protective reasons (at facilities governed by the NDS, written approval by a supervisory officer is sufficient).
- 5) In cases of disciplinary segregation, the review shall include an assessment of whether the current placement is appropriate based on the applicable detention standards and ICE policies, including:
  - a) Authorization by an order of the facility disciplinary panel following a disciplinary hearing;
  - b) Consistency of the disciplinary panel order with the Disciplinary Severity Scale from the applicable ICE detention standards; and

- c) Documented reviews by a supervisor every week after initial placement, including an interview with the detainee, to determine whether the detainee has received all services to which he or she is entitled.
- 6) If review of the segregation case indicates that the detainee is Limited English Proficient (LEP), the FOD shall also consider whether the initial placement or ongoing retention in segregation were the result of insufficient interpretation, including during interactions with facility staff, or due to other LEP related communication difficulties.
- 7) In his or her evaluation of the placement, the FOD must consider the initially identified reason(s) for placement, any new relevant information from subsequent facility reviews, and answers to the FOD's inquiries, and shall determine whether the continued placement in segregation is necessary, excessive, or in violation of applicable detention standards. As extended segregation should be used only when necessary, after engaging in an individualized assessment of the case, the FOD must consider as part of his or her evaluation whether a less restrictive housing or custodial option is appropriate, and, in coordination with ICE headquarters when necessary, arrange for utilization of such less restrictive options that are appropriate and available, including:
  - a) In consultation with the detention facility administrator, the return of the detainee to the general population;
  - b) In consultation with the detention facility administrator, options to limit isolation, including additional out of cell time and the ability to participate in group activities;
  - c) Transfer to another facility where the detainee can be housed in the general population or in an environment better suited to the needs of the detainee, such as a facility that has dedicated medical beds in its clinic, a medical observation unit, or better medical or mental health staffing, a facility that has a dedicated protective custody unit, or a facility that has a Special Management Unit with enhanced privileges; or
  - d) Consistent with requirements of mandatory detention, public safety, and other immigration enforcement considerations, release from custody.
- 8) If, at any time during the review, the FOD learns that the segregation placement meets any of the criteria described in subsection 5.2.2, the FOD shall immediately follow the procedures outlined in subsection 5.2.

**5.2. Segregation Placements Related to Disability, Medical or Mental Illness, Suicide Risk, Hunger Strike, Status as a Victim of Sexual Assault, or other Special Vulnerability.**

- 1) A detainee's age, physical disability, sexual orientation, gender identity, race, or religion may not provide the sole basis for a decision to place the detainee in involuntary segregation. An individualized assessment must be made in each case. Unaccompanied alien children must be treated in accordance with applicable statutes, regulations, and policies.

- c) For a detainee placed in administrative segregation because he or she was alleged to have been a victim of sexual assault, ensure the detainee is not held in administrative segregation on that basis for more than five days, except in highly unusual circumstances or at the detainee's request.
- d) For any detainee meeting the criteria in 5.2.2, including detainees in segregation at their own request, conduct a review to assess whether any less restrictive housing or custodial options are appropriate and available based on an individualized assessment of medical and security concerns involved in each case, and, in coordination with ICE headquarters when necessary, arrange for utilization of such less restrictive options that are appropriate and available, including:
  - i) In consultation with the detention facility administrator, return to the general population;
  - ii) In consultation with the detention facility administrator, options to limit isolation, including additional out of cell time and the ability to participate in group activities;
  - iii) Transfer to another facility where the detainee can be housed in the general population or in an environment better suited to the needs of the detainee, such as a facility that has dedicated medical beds in its clinic or better medical or mental health staffing, a facility that has a dedicated protective custody unit, or a facility that has a Special Management Unit with enhanced privileges;
  - iv) Transfer to a hospital; or
  - v) Consistent with requirements of mandatory detention, public safety, and other immigration enforcement considerations, release from custody.
- 7) The FOD shall complete the same reviews as are required by Section 5.1 whenever a detainee has been held continuously in segregation for 14 days, 30 days, and at every 30 day interval thereafter.

### **5.3. Field Office Reports to ICE Headquarters.**

- 1) The FOD shall develop a written report of his/her findings and any actions taken, and transmit it to CMD, with respect to detainees who meet the following criteria:
  - a) All detainees held continuously in segregated housing for more than 14 days or for 14 days out of any 21 day period who:
    - i) The FOD determines should have their segregation placements reviewed by headquarters;
    - ii) Meet one of the criteria listed in Section 5.2.2; or

10. **No Private Right Statement.** This document is an internal policy statement of ICE. It is not intended to, does not, and may not be relied upon to create any right or benefit, substantive or procedural, enforceable at law by any party in any administrative, civil, or criminal matter.

(b)(6),(b)(7)(C)



Acting Director  
U.S. Immigration and Customs Enforcement